### **INITIAL PLANNING CONFERENCE (IPC) MINUTES**

**January 15, 2013** 

**Date and Location.** The 2013 ESF 8 Functional Exercise Initial Planning Conference (IPC) was held on January 15, 2013 at the LHA Conference Center in Baton Rouge, LA. Attendees included representatives from:

First Name	Last Name	Organization/Agency
Ken	Alexander	LHA
Jason	Allemand	LERN
Clemia	Anderson	TPMRC
Knox	Andress	Region 7 Hospital DRC
		LSU
Myron	Chatelain	LNHA
Lisa	Comeaux	LALA
Karen	Contrenchis	Leading Age/Gulf States
Cindy	Davidson	Region 1 Hospital DRC
Connie	Deleo	Region 2 Hospital DRC
		Baton Rouge General
Charles	Eckert	Region 1 Mass Fatality DRC
		Jefferson Parish Coroner
Arbie	Goings	State Mass Fatality DRC
Liz	Harmon	Region 4/5 Hospital DRC
Chris	Hector	LERN
Louis	Lightner	HHS – Region 6 REC
Keith	Peek	Region 9 Hospital DRC
Malcolm	Tietje	DHH – Health Standards
Lucas	Tramontozzi	DHH – CTO
Allyn	Whaley-Martin	Region 2 Hospital DRC
		OLOL Regional Medical Center
Faith	Willis	CHS
Henry	Yennie	DHH

**Purpose.** The purpose of this IPC was to introduce the exercise concept, including local design objectives, scenario elements, participants, and exercise methodology, and to discuss exercise support requirements for the upcoming 2013 ESF 8 Functional Exercise. These minutes provide an overview of the conference including agreements made between ESF 8 exercise planners.

#### **Overview of Activities**

**General.** The Exercise Planning Team provided an agenda to include suggested exercise design objectives, scenario design, and exercise support requirements, including contractor support.

The Exercise Planning Team facilitated the conference, tentatively agreeing to hold the Midterm Planning Conference (MPC) on March 14, 2013 starting at 9:00 AM, and the Final Planning Conference (FPC) on May 16, 2013 starting at 9:00 AM. The primary option for the meeting location is the LHA Board Room. A secondary option will be communicated to the planning team if the primary option is not available.

Henry Yennie, from the Department of Health & Hospitals was chosen as the lead exercise planner for this exercise.

**Exercise Overview.** The 2013 ESF 8 Functional Exercise is scheduled to run for 1.5 days. Controllers and evaluators will be required to attend an evaluator orientation the day before the exercise and a debriefing the day after the exercise.

The purpose of the exercise is to reinforce the consistent and correct use of protocols and ESF 8 systems throughout an event cycle. In the planned exercise, a hurricane scenario will be used so that all players can walk through protocols and actions from the pre-activation stage through the recovery phase, including cemetery disruption response operations

### **Exercise Design**

**Purpose.** The purpose of the exercise will be to assess a range of ESF 8 stakeholder agencies' ability to respond to a hurricane scenario using appropriate ESF 8 information systems and protocols.

**Objectives.** The Exercise Planning Team suggested the following objectives. These will be reviewed and finalized by the group during the MPC:

- 1. Information Systems
  - a. Assess the ability of all critical healthcare facilities to use the appropriate systems in the ESF 8 Portal to provide status information within the requirements published by State ESF 8 officials.
  - b. Assess the ability of the Data Cell to organize and obtain missing status data from facilities failing to report.
  - c. Assess the ability of the respective associations to support data collection from facilities in coordination with the Data Cell
  - d. Assess the ability of facility to report significant events (such as power loss or fuel shortages) and to support patient evacuations in the appropriate ESF 8 systems.
  - e. Assess the ability of ESF 8 leadership to use the appropriate ESF 8 systems to communicate with facilities and other stakeholders, including decision-making groups for patient evacuation.

- f. Assess the ability of Regional ESF 8 teams to use appropriate ESF 8 systems to support patient evacuation activities at Aeromedical Marshaling Points and other venues.
- g. Assess the ability of the Data Cell to communicate significant information on demand to the ESF 8 leadership, using the appropriate ESF 8 systems and tools.
- h. Assess the ability of LERN and other ESF 8 coordinators to effectively use the appropriate ESF 8 systems to effectively execute their responsibilities.

#### 2. Mass Casualty/LERN Protocol Testing

a. Assess LERN protocol and applicability for the potential mass casualty situation.

#### 3. Patient Tracking

a. Assess the ability of hospitals, nursing homes and adult residential care facilities to effectively implement patient tracking for patient reception and status reporting during the exercise.

#### 4. Emergency Operations

- a. Demonstrate the ability to activate, staff, and operate the GOHSEP State ESF 8 EOC team
- b. Demonstrate the ability to activate, staff and operate the ESF 8 Data Cell.
- c. Demonstrate the ability to activate, staff, and operate Aero-medical Marshaling Points in selected areas.

#### 5 Communications

 Assess the ability of ESF-8 to establish and maintain communications with and disseminate information to critical healthcare facilities using appropriate ESF 8 systems.

Two additional objectives were added for the areas of Medical Surge and Volunteer Management. Each will have a workgroup meet and finalize objectives and scenarios.

**Participating Agencies:** The planning group had a limited discussion of which jurisdictions would participate in the exercise. The following jurisdictions have tentatively been identified to participate, with agency participation to be finalized through letters of commitment to be sent out by the Exercise Planning Team. These jurisdictions include:

- All hospitals, nursing homes and alternative residential care facilities statewide.
- The Region 3 and Region 9 teams will discuss the possibility of including AMP functional exercises in these regions.
- The State EOC teams will operate out of GOHSEP and other locations.

**Exercise Scenario Review.** The exercise will be held on June 25 and 26<sup>th</sup>. The controller and evaluator training will be held the day before, and the After Action Conference will be held on July 11<sup>th</sup>. Exercise conduct will occur at the State EOC.

The complete scenario list will be completed as each work group completes its subset of scenarios and injects.

**Support Requirements.** Controllers, evaluators, and a lead exercise planner are required for this exercise. No actors will be required to ensure exercise realism.

### **Outstanding Action Items**

The following actions remain open:

#### **Exercise Planning Team**

- Confirm exercise objectives.
- Confirm exercise scenario.
  - Workgroups meet to define (see Attachment 1)
- Identify venues (names and addresses of locations).
- Identify and invite possible participating agencies.
- Identify and send letters of commitment to participants.
- Draft a Master Scenario Events List (MSEL) for review at the MPC and MSEL conferences.
- Draft Exercise Plan (ExPlan) for review at MPC.
- Draft Controller and Evaluator (C/E) Handbook for review at MPC.
- Draft Exercise Evaluation Guides (EEGs) for review at FPC.

#### **Next Steps**

The MPC is scheduled for March 14<sup>th</sup> starting at 9:00 AM. As stated earlier, the primary option for the meeting location is the LHA Board Room. A secondary option will be communicated to the planning team if the primary option is not available.

### **Points of Contact (POCs)**

#### **Exercise Manager:**

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#### **Lead Exercise Planner:**

Henry Yennie
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#### **Attendee List**

Sign-in sheet is attached (Attachment 2).

### **WORK GROUP ASSIGNMENTS**

#### 1. HSEEP Workgroup

- a. Team Lead: Faith Willis
- b. Mission: To ensure that the exercise and its supporting documentation are HSEEP-compliant
- c. Objectives:
  - i. Develop a complete EXPlan
  - ii. Develop appropriate Exercise Evaluation Guides
  - iii. Review and approve the Master Task List
  - iv. Review and approve MESL documents
  - v. Review and approve the Evaluation Plan and AAR template
  - vi. Develop other documents as needed

#### 2. System Support Workgroup

- a. Team Lead: Chandra Gogineni
- b. Mission: To ensure that all exercise participants receive the support needed to effectively use the ESF 8 applications in support of exercise objectives
- c. Objectives:
  - i. Develop a System Support Plan
  - ii. Review and adapt the Risk Assessment Protocol
  - iii. Conduct a Risk Assessment specific to this exercise

#### 3. Data Cell Workgroup

- a. Team Lead: Lucas Tramontozzi
- b. Mission: To organize and manage the Data Cell group for the exercise.
- c. Objectives:
  - i. Obtain a roster of participating Cell members
  - ii. Acquire a suitable location for Data Cell operations
  - iii. Develop the action plan for this exercise
  - iv. Organize the analytical resources required to meet exercise objectives

#### 4. Facility Participation Workgroup

- a. Team Lead Hospitals: Ken Alexander
- b. Team Lead Nursing Homes and ARCPs: Malcolm Tietje
- c. Mission: To ensure the maximum number of facilities participate in the exercise
- d. Objectives:
  - i. Engage the DRC networks to assist
  - ii. Assist in the preparation of a Facility Communication Plan
  - iii. Assist in the development of exercise-specific messaging

#### 5. GOHSEP EOC Workgroup

- a. Team Lead: Timothy White
- b. Mission: To ensure maximum participation by the ESF 8 GOHSEP EOC team
- c. Objectives:
  - i. Obtain a roster of participating GOHSEP EOC team members
  - ii. Organize shift schedules for the exercise
  - iii. Manage the use of WebEOC and EMMA during the exercise

#### 6. Mass Fatality Workgroup

- a. Team Lead: Arbie Goings
- b. Mission: To ensure that the exercise has a credible mass fatality component
- c. Objectives:
  - i. Organize participation by the Mass Fatality DRCs and willing coroners
  - ii. Assist in the development of scenarios and messaging
  - iii. Coroner requests support for damaged morgue
  - iv. State staff manage request
  - v. Cemetery Disruption planning
  - vi. Data acquisition from risk areas

#### 7. AAR Workgroup

- a. Team Lead: Nicole Coursey
- b. Mission: To ensure that the evaluation of the exercise is HSEEP-compliant and that credible improvement plans are developed
- c. Objectives:
  - i. Assist in development of the Evaluation Plan and ARR documents and processes
  - ii. Assist in organizing AAR meetings
  - iii. Lead the main AAR meeting and organize the support necessary for complete documentation

#### 8. Medical Surge Workgroup

- a. Team Lead: Liz Harmon
- b. Mission: To ensure a credible scenario for exercising medical surge responses from hospitals
- c. Objectives:
  - i. Develop a scenario description and coordinate with other work groups.
  - ii. Develop sufficient MSEL injects to support the scenarios.

#### 9. Volunteer Management Workgroup

- a. Team Lead: Knox Andress
- b. Mission: To ensure a credible scenario for exercising volunteer management in the receiving regions
- c. Objectives
  - i. Develop a scenario description and coordinate with other work groups.
  - ii. Develop sufficient MSEL injects to support the scenarios.

#### 10. Patient Movement Workgroup

- a. Team Lead: Keith Peek
- b. Mission: To determine the level of play for AMP simulations in Regions 3 and 9
- c. Objectives:
  - i. With the Region 3 DRC, assess the need for AMP simulations in these regions
  - ii. Assist in gaining the participation of AMR and HHS
  - iii. Develop a scenario description and coordinate with other work groups.
  - iv. Develop sufficient MSEL injects to support the scenarios.

#### 11. Mass Casualty Workgroup

- a. Team Lead: Chris Hector/LERN
- b. Mission: To ensure a credible scenario for a mass casualty in one of the receiving regions
- c. Objectives:
  - i. Develop a scenario description and coordinate with other work groups.
  - ii. Develop sufficient MSEL injects to support the scenarios